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**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-875

Application or Docket Number  
**04-680,334****APPLICATION AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
			RATE (\$)	FEES (\$)	RATE (\$)	FEES (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))						
SEARCH FEE (37 CFR 1.16(k), (l), or (m))						
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))						
TOTAL CLAIMS (37 CFR 1.16(l))	minus 20 =	*	X	=	X	=
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X	=	X	=
APPLICATION SIZE FEE (37 CFR 1.16(b))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(l))						

\* If the difference in column 1 is less than zero, enter '0' in column 2

TOTAL

TOTAL

**APPLICATION AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
			Minus	**	=	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(p))	*	Minus	**	=	X	=	X	=
	Independent (37 CFR 1.16(m))	*	Minus	***	=	X	=	X	=
	Application Size Fee (37 CFR 1.16(s))								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(p))					TOTAL ADDE FEE		TOTAL ADD FEE	

1-17-06

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
			Minus	**	=	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(p))	12	Minus	** 20	=	X	=	X	=
	Independent (37 CFR 1.16(m))	2	Minus	*** 3	=	X	=	X	=
	Application Size Fee (37 CFR 1.16(s))								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(p))					TOTAL ADDE FEE		TOTAL ADD FEE	

\* If the entry in column 1 is less than the entry in column 2, write '0' in column 2.

\*\* If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter 2.

\*\*\* If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter 3.

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number shown in the appropriate boxes above.

This collection of information is required by 37 CFR 1.16. The information is required to obtain a patent or a trademark registration. It will be used by the USPTO to process your application. Confidentiality is governed by 35 U.S.C. 112 and 37 CFR 1.14. This collection of information is voluntary. Failure to provide the requested information may result in denial of your application. Your responses on this form are subject to inspection by the USPTO. Address all correspondence to the Commissioner for Patents, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. If you have any questions concerning this form, please contact the USPTO at 1-800-PTO-9199. ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.